Citizen Service Request Form

Administering Department: City Manager's Office 1500 Warburton Avenue, Santa Clara 95050 tel: (408) 615-2210 fax: (408) 241 6771

	Instructions		

Use this form to make a request for a City service, to make a suggestion about City services, or to register a complaint about these services. Please print out the PDF form, then fill it out and mail it, or deliver it to the City Manager's office, along with supporting documentation, letters, etc. (if any).

Date:			
Name (last – first – middle):			
Street Address:			
City, State, Zip Code :			
Home phone number*:			
Work phone number:			
FAX phone number:			
E-mail address:			
Specify service being requested/suggestion/complaint			

Street Address (if different from above):	
City, State, Zip Code:	
Details	
*Note: This is a public document. If your to you do not want it to be public, provide an be reached.	•
Certification of Au	thenticity
Beware , you are subject to prosecution if under penalty of law , transmission of thi is your certification that you are authorized information presented is authentic.	s form to the City of Santa Clara
Signature of Applicant	Date Signed